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Mrs. Nathaniel Thayer in Her Relationship to the Training School for Nurses

As Remembered by Sally Johnson, Principal of the School

Twenty-five years ago when I was a pupil nurse in this school, I came down the west stairs of the Thayer one noon and walked along the main floor corridor on my way out and over to the dining room. At the same time a tall, handsome woman of distinguished bearing came out of the Thayer Sitting Room, walked toward me, turned, and left by the central door. I followed along behind her admiring her regal bearing and to this day I remember that I thought she looked as I should expect a queen to look.

From some one I learned that this person of striking appearance was Mrs. Nathaniel Thayer. I also learned that our nurses' home was named for her husband, and I was of the opinion that Mrs. Thayer was in the building for the purpose of inspecting it. Now I know that she was attending a meeting of the Ladies of the Advisory Committee to the Training School for Nurses. She had left the meeting before it was over and was probably on her way to attend a meeting of some one of the other many organizations in which she was interested.

Soon after, the formal graduation exercises came and we all attended them. Here we saw several men and women whom none of us seemed to know. We did know that hospitals had trustees and we believed that the men were probably trustees. But who were these women? During those first months we as students had heard nothing about Training School Committees and we could not account for the presence of those ladies. In fact we wondered just why they did attend when room was at such a premium. When I recognized Mrs. Thayer among the group I felt quite well informed and explained to my class-mates that her husband was a trustee and that the nurses' home was named for him. This explained her presence.

The day came when I finished the course and was given the school diploma and pin. Somewhere along the way I heard about the personnel and functions of the Training School Committee and I found Mrs. Thayer was a member of that committee. When the superintendent of nurses gave me the pin she said, "Mrs. Thayer gives these pins to the graduates". This impressed me as being a very generous thing for her to do. I wonder how many of my class ever thanked her. I know that I did not until years later.

That we did not thank her was not due to our lack of appreciation or to our lack of courtesy, but rather to our lack of any sense of personal relationship to the members of the Training School Committee. Today, students know more about school organizations than they did then. They have a keener realization of the relationship of the hospital to the community.

During the first years that followed my graduation in 1910, I was near enough to the school to attend the graduation exercises and other functions of the hospital. I met Mrs. Thayer from time to time and was always impressed by her keen interest in the school. I liked her direct manner of approach to the subjects discussed. I was impressed by her rare social grace. Meanwhile, I had discovered yet more about the functions of training school committees. I had also learned about Mrs. Thayer's prominent place in the community and I was glad that she was so closely identified with my hospital and school. In some way, even then, I knew that she made a valued contribution to those organizations with which she was associated. Even as a young graduate I had a personal sense of ownership whenever I heard or read about Mrs. Thayer.

One day soon after graduation while walking through the Boston Museum of Fine Arts, I came upon a portrait of Mrs. Thayer. I think it had been lent as a part of some artist's personal exhibit. The portrait was not only a thing of beauty in itself, but it was also a vivid portrayal of strength of character through face and bearing. I remember especially that as I stood and looked at it I experienced a sense of pride of possession. The person it portrayed belonged to my then small domain: to my hospital and to my school.

In 1917 I left Boston to go to the Albany Hospital. Immediately the Great War was upon us. Dr. Washburn, Miss Parsons, and Miss Hall were off to Europe. We, too, in Albany Hospital sent off our Base Hospital. Those were busy years and my contact with my home hospital and school were infrequent and brief. But I read with eager interest any news of Boston and during those years I often saw Mrs. Thayer's name. I realized more and more the extent of her contribution to the social, political, and philanthropic world in which she lived.

In 1918 the War was over and early in the next year Dr. Washburn, Miss Parsons, and Miss Hall came home. Soon after her return, Miss Parsons made a tour of visits to schools of nursing, many of which were administered by graduates of the Massachusetts General Hospital School. She visited me in Albany and we talked long about the policies and practices and problems of training schools for nurses. One of our subjects was the Training School Committee. We had no such committee at the Albany Hospital. Miss Parsons told me about ours here, of its value and of its personnel. And she particularly explained to me the relationships of our committee to the hospital trustees. She told me how valuable it was to the school to have Mrs. Thayer who held the dual position of hospital trustee and chairman of the Advisory Committee to the Training School.

Soon after, Miss Parsons was back at this school, in May, 1920, I received a letter from Dr. Washburn in which I read, "You have perhaps heard that Miss Parsons has resigned from the position of superintendent of this training school for nurses. My inclination is to nominate you for the position, if you are willing. Perhaps you would like to come down here to talk the matter over with me, and meet some of the trustees and ladies of the Advisory Committee to the Training School". A week later I came for the interview. Mrs. Thayer was the only member of the Advisory Committee who came to see me. I thought at the time that the reason for my lack of self-consciousness as a possible candidate for the appointment was due to the fact that I was then holding a position which challenged any ability I might have. Now I know that my lack of self-consciousness was in no small part due to Mrs. Thayer's friendly attitude and gracious manner during an interview that might have been a very trying one for me.

On September first of that year, 1920, I came to the school to be with Miss Parsons for a month before taking over the responsibility of its administration. Miss Parsons left on the last day of September and the first Monday in October brought the first fall meeting of the Ladies of the Advisory Committee. It is not necessary to express here my emotions as I walked from my office to appear for the first time before that committee. Mrs. Thayer

was the presiding officer. She saw me coming through the entrance hall. She did not wait for me to enter the room and face the group. Instead she left the group and came forward to shake my hand. She set the tone of friendliness that pervaded that meeting. There was no attitude of scrutinizing appraisal of the new superintendent. Instead there was an attitude of welcoming an alumna home again.

On that day in October, 1920, began between Mrs. Thayer and me a relationship, not only an official one, but a very friendly one, - a relationship that continued until her death almost exactly fourteen years later. From this relationship I learned to know something of what it meant to be a woman of large affairs. I observed not only evidences of the satisfactions that often came from those many interests, but also evidences of fatigue that sometimes came as the result of the demands of those many interests.

For a continuous period of over forty-seven years, nearly half a century, Mrs. Thayer has served this hospital in one capacity or another. As Pauline Revere she received her first appointment in 1887 to the Ladies Visiting Committee, a hospital committee whose members visit the patients. During that year she married Mr. Thayer. In 1893 she was also appointed to the Board of Directors of the Boston Training School for Nurses, which, in 1896, became the Massachusetts General Hospital Training School. That Board of Directors then went out of existence. In December of 1899 the trustees of the hospital voted to invite a certain number of ladies and gentlemen to form a committee which should act as an advisory committee to the Trustees Committee of the Training School. Mrs. Thayer was invited to become a member of that committee and accepted the invitation. In 1916 Governor McCall appointed her a trustee of the hospital and in May of the next year the trustees voted her not only a member, but the chairman of the Trustees Committee of the Training School. She also acted as chairman of the entire advisory committee, including the representatives from the medical staff and the ladies of the group. This position Mrs. Thayer held until the time of her death, September 30, 1934.

X While it is common practice to place one or more trustees upon the Training School Committee, rarely is the trustee a woman and even more rarely does that trustee possess the interest, sympathy, and understanding of school affairs that Mrs. Thayer had. Any progress the school has made during the last thirty years is to a large degree due to Mrs. Thayer's understanding of the needs of the school and to her convincing interpretation of those needs to the hospital trustees. They looked to her for information and advice regarding those matters that pertained to the school. They respected her opinions and judgments and acted upon her recommendations.

For fourteen years I myself have seen Mrs. Thayer preside over those meetings of that advisory committee comprised of trustees, members of the medical staff, ladies representing the community, the hospital director, and the principal of the school. She had a sense of pride in the school and while she welcomed any committee member's expression of appreciation of its work, she urged the members to feel perfectly free to discuss any policy or practice of the school about which they were not entirely satisfied. She was an impartial, tactful, and experienced presiding officer. When she guided the discussion, there came about a more sympathetic understanding, even though the topic were a controversial one. In these committee meetings, under Mrs. Thayer's expert guidance, some of the sixty year old conflicts between nursing education and nursing service were removed of much of their sting.

Helpful to me as Mrs. Thayer was as the presiding officer of these various meetings, an even greater helpfulness came from the personal conferences I had with her. Because of her high degree of intelligence, her comprehensive understanding, and her vast experience in dealing with people, she could not only see the many issues involved in the problems to be solved, but she could also see the far reaching results of the proposed solutions. X

As long as memory of my years as principal of this school lasts, I shall remember Mrs. Thayer as she looked when she came through my office door again and again to ask, "Is there anything you wish to tell me?", or, "Can I do anything for you?". Occasionally she came in response to an especial request of mine, perhaps regarding the problem of some individual student. While in these matters she zealously guarded the interests of the school, she also carefully guarded the interests of the individual.

As would be expected, persons sometimes appealed to Mrs. Thayer to modify some of my decisions. The majority of such appeals pertained to decisions relative to the appointments of certain applicants. To such requests she always replied that she would be glad to inform herself about the matter but that she could have no opinion upon the subject until she had obtained such information. Mrs. Thayer herself sometimes interpreted the information which she obtained, but more often she referred the inquirer back to me, suggesting that another talk with me would clarify the reasons for my decision. Never once did she place me in an embarrassing position. Only in part was this due to any sound judgment which I may have possessed, but rather it was due to such skill as I may have acquired in the use of her measuring rods for equity and justice.

X The alumnae knew Mrs. Thayer best as the presiding officer of many graduation exercises. Her presence added dignity and grace to these occasions, and through some undefinable medium, made us sense the high place this institution holds in the respect of the community. We were proud;- proud of Mrs. Thayer, of the hospital, and of the school.

For nearly forty-eight consecutive years Mrs. Thayer has been associated with this school! What a force for stabilization these many years of association have been! No alumna living can adequately measure the worth of that contribution. But every alumna living is grateful for it.

X
We shall always think of Mrs. Thayer as a personage, as A Great Personage.

Mrs. Vaughan died at her summer home in Hallowell, Maine, Thursday morning, August 30th. The funeral service held in Hallowell the following Saturday was attended by Miss McCrae as a representative from the School and Miss Peterson as a representative from the Alumnae.

The Massachusetts General Hospital Training School for Nurses has lost one of its truest friends. The School never has had and never will have a more helpful one.

The daughter of Dr. Samuel Parkman and Mary Dwight Parkman, Mrs. Vaughan inherited an interest in the Hospital and in the School. Dr. Parkman was a member of the Medical Staff from 1846 until his death in 1854. It was to Mrs. Parkman that Miss Sarah Cabot, a member of the Woman's Educational Association which was seeking a new means of livelihood for young women, suggested the advisability of the establishment of a Training School for Nurses in Boston. Mrs. Parkman believed that there was a need for such a school. She had recently visited Florence Nightingale in London and was familiar with the Nightingale School at St. Thomas Hospital. She readily agreed to become a member of a committee to work out a plan for a school in Boston.

The first work of this committee was done during the winter of 1872 - 1873. The committee emerged and enlarged into a Board of Directors of which Mrs. Parkman was also a member. These two groups created in 1873 the Boston Training School for Nurses which from the first was affiliated with the Massachusetts General Hospital and later, in 1896, became the Massachusetts General Hospital Training School for Nurses.

Mrs. Parkman worked diligently for this School from the time of

its inception in 1872 until her death in 1878. In the history of the School, Miss Parsons wrote "Mrs. Parkman was acknowledged to be the soul of the organization for the five years previous to her death."

The meetings of that first Committee and of the Board were often held in Mrs. Parkman's home. The daughter, later Mrs. Vaughan, was then in the early twenties. One can easily understand how the daughter became interested in the new project and why her interest was sustained.

And so she herself accepted the invitation that came February 4th, 1882 to serve on the Board of Directors of the Boston Training School for Nurses. She served on that Board until the School was transferred to the Massachusetts General Hospital on January 1, 1896. The Board then disbanded.

From this time there was no committee of ladies working with the trustees and staff for the interest of the School until 1899 when the trustees voted to appoint an Advisory Committee to the Training School. It was in December of 1899 that a trustee of the Hospital invited Mrs. Vaughan to be a member of this new committee. The invitation was accepted and she served without interruption until her resignation in October, 1931. This resignation was reluctantly accepted and Mrs. Vaughan was urged to continue to attend the meetings of the Committee whenever possible. This she occasionally did. The last one attended was in the autumn of 1933. Since then, although unable to attend a meeting, she was in frequent correspondence with the principal of the School, writing her last letter in April when the subject was the eight hour day for special duty nurses in the Hospital.

For fifty-two years, with the exception of that brief interim at

the time of the transfer of the School, Mrs. Vaughan has been actively interested in working for the School. Now many will say that the service of one of the School's most helpful friends is finished. A service such as this is never finished for its influence for good extends throughout all time.

Anyone who surveys the work of the members of the Board of Directors and of the Advisory Committee is impressed with the earnestness with which Mrs. Vaughan endeavored to further the interests of the School. She was so faithful in the attendance of the meetings; so seldom absent. There are literally hundreds of pages of written reports of those meetings. There are reports of commissions which she carried out, such as visiting the alumnae who were sick in the homes, students who were on duty in the wards, the dining room and the nurses' homes. Of course all this is written in longhand; in that large, clear handwriting which suggested strength of personality. Her opinions expressed in these meetings carried great influence for they were the result of long experience and sound thinking, and what is equally important, the opinions were clearly and convincingly expressed. Just after the World War there was a great shortage of suitable applicants to the schools and there were many new hospital problems during that period. Mrs. Vaughan's influence often prevented the committee from adopting new policies which time would have proved unwise.

Not only did Mrs. Vaughan carry great weight with the hospital group but this influence extended out into the community to which she interpreted the work and needs of the school. No one had more influence with the city rulers than she did in bringing about the laying of quiet pavement material around the Walcott House at the time it was built. There is no doubt that she frequently corrected the misunderstanding that the laity often had of the principles and practices of a large hospital and of a large school.

Probably no member of the hospital and school personnel was privileged to know Mrs. Vaughan as a person better than the writer. She has reason to know that although there was a carriage dignified and commanding, a manner formal and reserved, a mind analytical and measuring, qualities which might suggest an impersonal attitude toward others, there was underneath as warm a heart as ever a human being possessed and a quality of loyalty to friend and cause that nothing but unworthiness of friend or cause could shake.

The writer recalls several acts of Mrs. Vaughan's that revealed the nearness of the school to her heart. She very much wished the students and graduates of the school to acquire a deep feeling for the school. It was for the purpose of helping to create this feeling that she had privately printed "The Personality of the Hospital", the address given by Dr. Cushing on the occasion of the celebration of the one hundredth anniversary of the opening of the hospital. One of these books she had presented to each member of the graduating classes. Early in this year she checked the number of these books on hand.

A day long to be remembered was that one when Mrs. Vaughan came into the office bringing a beautiful statuette of Florence Nightingale. She said: "This statuette was made by Hilary Bonham-Carter, a cousin of Miss Nightingale's. My mother brought this back from England with her when she returned from that visit during which she talked with Miss Nightingale about the school at St. Thomas Hospital. This statuette has stood on our mantel for half a century. In my will I have left it to the school, but I am sailing for England in a few days and I wish to give it to you now for the school." She had then passed the three score years and ten and perhaps she thought that she might never return from England.

The principal of the school was given a year's leave of absence.

One morning soon after her return to the school a man appeared at her office door carrying a huge bouquet of golden blossoms. It was made up of snapdragons and of chrysanthemums of every size. The bearer presented a note from Mrs. Vaughan which explained that these flowers were part of the floral decoration of her golden wedding and that they were sent to welcome the principal back and to express her "affectionate regard". Could any act be more gracious!

Mrs. Vaughan last visited the hospital in January of this year. At that time she brought to Dr. Washburn the records of the early meetings of the committee. They were placed in the Treadwell Library for safe keeping. Soon after her death the writer looked through those records and there in one of the record books, of the year 1917-18, was a memorandum written and signed by Mrs. Vaughan. It was dated January 6, 1934, the day she brought these records to the hospital. The memorandum gave facts that pertained to her record of service -- nothing but facts. Too modest to write at length of her service, this brief statement was placed where it might not have been found for years.

Mrs. Vaughan possessed a family inheritance rich in those qualities that have made Boston's finest citizens. Among these qualities is a willingness to give generously of their time, influence, and wise guidance to the worth while institutions of the community. That in practicing this principle of her family inheritance, Mrs. Vaughan elected to give generously of her time, influence, and wise guidance to this school is the great good fortune of the Massachusetts General Hospital Training School for Nurses.

Written by S. Johnson when
nursing made 2 nurses
just law.

SUGGESTIONS FOR SPEAKERS ON NURSING LEGISLATION

Introduction

Nursing legislation is being prepared:

(1) That any person employing a *registered nurse* may know that she has had at least a minimum preparation. To aid the superintendent of nurses to plan and carry out a curriculum, and to provide practical experiences that will give the nurse an adequate preparation, an Educational Director for all schools wishing to be registered is desired.

(2) To provide a group of workers less technically trained than a graduate nurse, who will be prepared to care for convalescent patients and mild and chronic illness. This worker to be known as a "nursing attendant."

History of Present Law

The older nurses before us worked hard for the first bill; presented it in '04, '05, '06, '08, and '09 (lost by one vote). It was passed in 1910.

First law created Board of Examiners and provided for the arrest of violators. Applicant must be twenty-one years of age, and of good moral character. Under the first law it was not necessary for the applicant to have ever been in a training school. Amendments in 1919 provided that applicants shall be graduates of a school approved by the Board, and provided for a yearly renewal of registration in order that we may have a "live list" and know address which is relatively recent. During the war and epidemic the registration list was useless for reaching nurses. (M.D.'s do not move as often as nurses.) Fifty cents barely pays renewal expense.

Why Not Satisfactory

Why are busy women already overwhelmed with the work of their respective jobs taking on this additional burden of attempting to procure amendments to the present law?

Because they believe that the law governing the practice of nursing in Massachusetts should be a stronger one.

(1) By providing a law which will more nearly assure the person employing a registered nurse that the nurse has had at least a certain minimum preparation.

(2) By providing a worker less technically trained than the registered nurse for the care of mild or chronic illness or for the care of convalescent patients; this worker to have had definite preparation for this particular work.

(3) By providing an educational director in order that the Board of Nurse Examiners may have more knowledge of the preparation which the nurses have had who come up for examination.

The Board of Nurse Examiners

Appointed by the Governor with the consent of the Council. Now five members—three are nurses from different schools, having had eight years' experience, and two are doctors—one the Secretary of the Board of Medical Examiners (Dr. Prior), *ex-officio*; the other, now a superintendent of a hospital having an approved training school (Dr. Howland); others: Miss Riddle, Miss Thurlow, Miss Jacqueth.

NOTE: The State Hospitals feel that their nursing problem is so great that they should have representation on the Board, therefore, proposed to add a superintendent of one of the state hospitals having a registered school, to keep a majority of nurses—one more nurse added—hence

(1) Proposed Amendment:

Board of seven members—four of them nurses, three physicians; the added physician to be superintendent of a state hospital having a training school.

Work of Board and Compensation

Gives at least eight days to examinations; four days to quarterly meetings, and four days to conferences and examinations; total, sixteen days. At least one thousand nurses a year take examinations. Six theoretical subjects. Four of the present members each correct

one thousand papers; Miss Riddle has two subjects and corrects two thousand papers. All assist with practical examinations. Other than the Secretary, members paid five dollars a day and expenses, sum total not to be over one hundred and fifty dollars; in other words, thirty days' pay. If sixteen days are used for examinations and meetings, only fourteen are left for correcting papers, etc. This allows no time to visit schools nor to look over questionnaires which have been sent out to the schools. If attendants are licensed it allows no time for the extra work which that will entail.

(2) Proposed Amendment:

The total pay to each member, other than the Secretary, raised from one hundred and fifty dollars to three hundred dollars. Superintendent of State Hospital also excepted.

Eligibility for State Examination

Age now twenty-one years—change to twenty. Possibility of shortening training course to two years four months, or possibly to two years. Graduating from high school at eighteen, will not be twenty-one when graduating from training school if course shortened.

(3) Proposed Amendment:

Twenty-one years reduced to twenty years. Law states graduate of a school "approved by the Board" shall be examined, etc.

Desirable to put educational requirement into the law.

(4) Proposed Amendment:

Has had a preliminary education of not less than one year of high school or its equivalent.

It is the policy of the state to keep expenditures as low as possible, and still be consistent with Good Government. If we raise the pay of the members of the Board, and if we employ an educational director, the extra expense must be financed, and it must be financed from the income of the department, hence the reason for increasing the fee.

(5) Proposed Amendment:

Raising the fee from \$5 to \$10.

Provision for a Subsidiary Group of Workers

“When we find that certain private physicians, like the public health administrators, demand nurses of a higher quality than those now in the field, while others desire merely ‘hands for the physician’ with a minimum of education below the present standard, it seems probable that there is reason on both sides and that the apparent conflict is due to a difference in the objectives to be met. For the care of acute and serious illness and for public health work it seems certain that we need high natural qualifications and sound technical education; for the care of mild and chronic illness and convalescence it may well be that a different type of capacity and training may be necessary. . . .

“On the other hand, the danger in the existence of a loosely defined and unregulated group of partially trained workers, in the same field as a more highly educated type, constitutes a real and a serious complication. The nursing profession has discharged a fundamental duty to the public in stimulating the development of registration laws which define and delimit the practice of that profession, and protect the community against fraud and exploitation by those who collect fees and assume responsibilities to which their qualifications do not entitle them. In addition to the registration of the trained nurse it is essential that the lower grade of nursing service should also be defined and registered; and the states of New York, California, Michigan, and Maryland have taken definite steps in enacting legislation toward this end. The name to be selected for the subsidiary group is a difficult problem.” — *Quoted from the Rockefeller report.*

Trained nurses in United States.....149,128

Untrained nurses151,996

Realizing that this group is here and is needed, also that it is unregulated, and if its members are not qualified by the R.N., they will be regulated and classified by someone else, the M.S.N.S. is proposing to provide for their licensure in this bill.

(6) Proposed Amendment:

Relative to the Licensed Nursing Attendant.

NOTE: Nineteen years, grammar school or equivalent, graduate of school for attendants (nine months), fee for examination five dollars, renewal fee fifty cents.

Explain why the renewal. Correct list. Fifty cents only pays the clerical expense.

The term "Licensed" rather than "Registered" in order to give the letters L.N.A. instead of R.N.A.

Waiver for Nursing Attendants:

- (a) Those licensed in another state.
- (b) Women who have had five years as nursing attendants, the five years next prior to the time of passage of this bill.
- (c) Graduates from schools for nursing attendants, all of whom must apply for the waiver within a year of the time of the passage of the bill.

Provision for Educational Director

The Board desires more adequate means of ascertaining the status of the schools sending their graduates for examination. The knowledge which the Board now has of the schools is largely gained through questionnaires. No Board member has time to visit the school, and an Educational Director is desired for this purpose of visiting the school and helping the school to maintain the right standards.

No school would be visited unless it sought the official of the Board and wished its graduates to be admitted to examination.

New York State accepts registration in no other state (except under waivers). One reason why it does not accept registration in Massachusetts is because our Board has so little knowledge of the schools. Every superintendent of a school, worthy of the name, wishes her school to meet the approval of this Board and would welcome constructive criticism. If the Board is made up of the right type of individuals there is no danger of the members' not being influenced by reasonable suggestions as to what constitutes the essentials of an "approved school." To provide more adequate means of knowing whether schools should be approved, and for aiding superintendents to better their schools, the eighth amendment has been made. It reads:

The Board of Registration of Nurses shall be authorized to employ a person as an educational director who shall be a registered nurse, and registered under this law, and who shall have had five years' administrative experience in schools of nursing approved by the Board. The said educational director shall receive a salary of twenty-five hundred dollars, and the necessary traveling and incidental expenses actually incurred in the performance of his official duties. The said salary, together with the necessary traveling and incidental expenses, shall be paid from the receipts of the Board. It shall be the duty of the educational director, under the direction of the Board of Registration of Nurses, to visit the training schools for nurses and the training schools for nursing attendants, seeking approval by the Board, giving advice, aid, and encouragement to such schools as to the educational preparation of the students entering these schools, as to curricula, practical experience, and methods of instruction, in order that they shall maintain standards approved by the Board of Registration of Nurses, and shall perform such other duties as may be required by the Board.

The Campaign

State Legislative Committee — County Legislative Committee — Alumnae Legislative Committee. To be reached — all nurses, public-health workers, social service workers, women's clubs, medical societies, persons interested in public welfare, philanthropists, and last — Legislators.

Conclusion

Senators and Representatives will usually vote for a bill if they can be shown it is for the public good. It is the job of the M.S.N.A. to convince the Legislators of Massachusetts that this bill is for the public good, because it will improve the nursing care of the sick. Why? Because of an educational director who means better prepared nurses, and because the public needs nursing attendants.

The best means of convincing Legislators is to convince thousands of their constituents to this belief. To convince these constituents is your and my business, and we should, every one of us, be about our business.

The School in Review

BY

SALLY JOHNSON, R. N., *Superintendent of Nurses*

FIFTIETH ANNIVERSARY OF THE FOUNDING

OF

THE MASSACHUSETTS GENERAL HOSPITAL TRAINING
SCHOOL FOR NURSES

OCTOBER 15, 1923

Old South Meeting House — Boston, Mass.

Tonight the Massachusetts General Hospital Training School for Nurses is in the midst of a celebration of the Fiftieth Anniversary of its founding. It is the middle of October, the season of the year when nature begins her quiescent stage. The fruits of the tree and vine are gathered, the leaves are falling and disappearing, the birds are leaving us for the South, before long the small animals will begin to burrow, and the larger ones will seek the fastness of the forest.

But for us, human beings, this is the beginning of the season of greatest activity. It is at this time of the year that civic, philanthropic, social, and educational organizations take on a new lease of life. Hope runs high because the vacation season has brought fresh enthusiasm, renewed courage, and a clearer vision. The solutions of some of the old problems seem only just around the corner.

It is a vigorous spirit that the autumn of 1923 finds in us of this generation. It was a similar spirit that the autumn of 1872 found in the men and women who were facing the problems and carrying the responsibilities of that generation.

Tonight we are concerned with but one of those problems which seemed to be the especial responsibility of a certain group of Boston men and women in the autumn of 1872.

The problem of this group was to find a new occupation for self-supporting women. The group was known as the Industrial Committee of the Woman's Education Association, an association not to be confounded with the Women's

Educational and Industrial Union. A member of the Industrial Committee of the Woman's Education Association, Miss Sarah Cabot, suggested to another member of the committee, Mrs. Samuel Parkman, that the new occupation for women should be trained nursing, which would also be the means of filling the need for private duty nurses in the community. Mrs. Parkman had recently visited Florence Nightingale and the school at St. Thomas', London, and, therefore, responded favorably to Miss Cabot's suggestion.

As a result of the conference between these two women, a self-formed committee met frequently during the winter of 1872 and 1873, to consider ways and means of organizing a training school for nurses in Boston. In April of the latter year, the committee advised the Woman's Education Association to found such a school. The association voted to adopt this suggestion, and appointed a committee to carry out the details of the founding. The personnel of the committee guaranteed success. The members were Mrs. Samuel Parkman, Mrs. G. H. Shaw, Miss Sarah Cabot, Miss Mary Ann Wales, Mr. J. M. Codman, Dr. Calvin Ellis, Mr. F. A. Sanborn.

Many meetings resulted in rapid developments. The Trustees of the Massachusetts General Hospital were asked if a school might be established in relation with that institution. The Trustees agreed and voted to give over to the school the nursing care of the patients in two of the wards of the hospital.

It was no small undertaking to find a superintendent for the new school, as there were no American-trained graduate nurses at that time. The physicians at the New England Hospital for Women and Children had a small group of nurses in the process of training. The Bellevue Hospital had started its school only in May, 1873, and the Connecticut Training School had started in September of the same year. These comprised the entire training school field in America.

However, the dauntless committee engaged a Civil War hospital nurse as superintendent, two successful domestic nurses for the positions of head nurses, enrolled four pupils, engaged 45 McLean Street for a nurses' home, and notified the

Massachusetts General Hospital that the school would be ready to begin November 1, 1873, and begin it did.

The Woman's Education Association soon severed all connection with the project, its function being only to initiate educational movements which should be given over to other control as soon as feasible. Therefore, on November 5 of the same year, the control of the school was transferred to a Board of Directors comprised of twenty-three members of which Mr. Martin Brimmer was president. It is well to review those names and pause for a moment to reflect upon the varied and worthy contributions which those men and women made to this community and beyond this community, to the world. Besides those persons already named in the original committee, the Board of Directors was comprised of Dr. LeBaron Russell, Mrs. Francis Brooks, Mrs. J. M. Codman, Miss A. D. Sever, Miss Annie S. Robbins, Miss Louisa Bangs, Miss E. F. Mason, Miss Maria Revere, Dr. C. P. Putnam, Dr. F. Winsor, Dr. Reginald H. Fitz, Dr. O. F. Wadsworth, Mr. C. G. Loring, Henry Cabot Lodge, Mr. Henry L. Higginson. Such is the type of men and women who considered the preparation of young women for the care of the sick of sufficient importance to give it their attention, and their financial support. Most important of all, many of them gave unstintingly of themselves.

It was fortunate that the founders were of the calibre who could hew to the line and never lose sight of the goal—for the first year was a trying one. No one in the school seemed to assume definite responsibilities. The pupils complained of their instruction. The medical staff said: "Put out the school, we don't want it, it is no good, our former way was better."

But the Directors firmly believed in their project, and the hospital agreed to give the school another year's trial if an experienced superintendent could be found. The committee procured Linda Richards, a graduate of the first class at the New England Hospital for Women and Children, who had had a year's experience at Bellevue during the formative period of that school. Miss Richards possessed a pleasing, forceful personality as well as experience and ability and soon

brought order out of chaos. The pupils became happy and contented, the hospital staff referred to "our school" with pride, and the Hospital Trustees reported in 1875 "gratifying success of the school," and stated that "an arrangement has been made to extend its usefulness by gradually placing all the wards in charge of the school."

For twenty-two years those splendid men and women who comprised the Board of Directors carried the work. They were responsible for finances, they interviewed pupils, visited wards, attended lectures, and, for sixteen years, corrected the lecture notes. Their vision of what comprised an adequate preparation for a trained nurse was truly remarkable. When experience was lacking at the home hospital, students were sent to other institutions where additional experience could be obtained.

The years from 1881 to 1889 were especially progressive under the leadership of Anna C. Maxwell. The "Thayer," a nurses' home, was erected; many duties, previously performed by students, were delegated to maids; greater attention was given to the student's health; instruction was increased, and a badge and uniform were adopted.

Soon after 1890 there were evidences that the responsibilities of the school were resting very heavily on the Directors. Policies became conservative; good suggestions were made but not carried out; probably because of the uncertainty of income and of the uncertainty of satisfactory administration. In November, 1895, twenty-two years after the founding of the school, the Trustees of the hospital wrote a letter to the Directors of the school expressing appreciation of their accomplishments. In this letter appeared the following: "The Trustees of the hospital have gradually come to the belief that the best interest of this hospital will be promoted by the establishment of a closer relation between the school and it, and that this can best be accomplished by placing the school under the management of the hospital Trustees."

The Directors agreed to this suggestion, and the school, which had borne the name of "The Boston Training School for Nurses," was transferred to the management of the hospital on January 1, 1896, and was renamed "The Massachusetts General Hospital Training School for Nurses."

About 1900 began a second period of rapid development under Miss Pauline Dolliver, a graduate of the class of 1889. The graduate staff was increased, many students were given the preliminary course at Simmons College, obstetrics and operating experiences were given to all students, and affiliations were arranged for pediatrics, for experience in the care of patients in a private hospital, and for district nursing. Instruction was increased through bedside clinics, special lectures, and the appointment of a practical instructor. That instructor was Annabelle McCrae, who for over twenty years has served the school in this capacity. No person connected with the school has contributed more to its upbuilding than has Miss McCrae. In 1901 the course was lengthened to three years and in 1903 the first formal graduation exercises were held.

The decade beginning 1900, with Miss Sara Parsons, class of 1893, in charge, brought continued developments. Among these were an increasing number of social activities, student government, scholarships, loan fund, endowment fund, two full-time instructors, additional affiliations, another nurses' home, the fifty-two-hour week, and the establishment of the five-year course in conjunction with Simmons College.

The years of the immediate past have brought another full-time instructor, an amplified curriculum, additional and better housing facilities, and a corps of ward helpers in order that some of the noneducational duties may be eliminated from the students' daily responsibilities.

Today the school is fifty years old and this is its golden anniversary. To it have come young women, not only from practically every part of the United States and Canada, but from England, France, Switzerland, Germany, Greece, Italy, Armenia, Albania, Syria, China, Czecho-Slovakia, Poland and India. The graduates number over 1,500, and they are engaged in every known form of nursing work. They have gone to every state of the Union, and to every continent on the globe.

Among the graduates in active work today, only ten are engaged in work other than that which has to do with the promotion of health. Nothing could prove more conclusively

the satisfaction which the graduates have found in their work.

Such is a brief review of the Massachusetts General Hospital Training School for Nurses. It is a simple enough matter to give such a history, but there is another side of the story which is not so easily told. It is the story of what the school has meant personally to the hundreds of young women who have gone out from her doors. It would need the soul of a poet with the tongue of an orator to express in words the extent and depth of the influence which the school has had upon the lives of her graduates. She has not only put into their hands the ability to care for the sick which is one of the greatest services any human being can render mankind, but she has given a large majority of her graduates a self-reliance, a resourcefulness, a sympathy, a charity, and an understanding of life which few possess.

Because of these qualities we have enjoyed a richer life than is the lot of many. For this richer life we are grateful to the school — Freely we have received — freely may we give!

THE MASSACHUSETTS GENERAL HOSPITAL TRAINING SCHOOL FOR NURSES

IN 1872 the Woman's Education Association was seeking new occupations for self-supporting women. Miss Sarah Cabot, a member of the committee, suggested to Mrs. Samuel Parkman, another member, that trained nursing offered a desirable occupation, which would also fill the need for private nurses in the community.

Consequently the Association appointed a committee to prepare and present plans for establishing a nursing school. Many gave personal and financial support. The Trustees of the Massachusetts General Hospital consented to give over to the school the nursing care of the patients in "The Brick." The house at 45 McLean Street was secured for a nurses' home. The committee engaged Mrs. Billings, a Civil War hospital nurse, as superintendent, and two head nurses from the practical nursing ranks. Four pupils were enrolled. The Hospital agreed to pay the school \$150 a month. When the establishment of the school was assured, the Woman's Education Association withdrew and the committee carried on the work.

The opening date was November 1, 1873. At a meeting held November 5, the committee transferred all control and property to a Board of Directors, of which Martin Brimmer was president. At this meeting the school was officially named "The Boston Training School for Nurses."

The first year was unsuccessful. The pupils complained of their instruction and of the home matron. The Staff said, "Put it out; we don't want it; it is no good; our former way is better." However, the Directors, believing in their project, sought an experienced superintendent. The Trustees agreed to give the school another year of life provided a graduate nurse were placed in charge.

The committee procured Miss Linda Richards, a graduate of the New England Hospital for Women and

Massachusetts General Hospital

Children, who had had a year's experience during the formative period of the Bellevue School. Miss Richards possessed experience, ability and a pleasing, forceful personality, and soon brought order out of chaos. The pupils became happy and contented; the Staff referred with pride to "our school"; and the Trustees reported in 1875 "gratifying success of the school" and stated that "an arrangement has been made to extend its usefulness by gradually placing all the wards in charge of the school."

For twenty-two years those splendid men and women who comprised the Board of Directors carried the work. They financed the project, interviewed pupils, visited wards, attended lectures, and for sixteen years corrected the lecture notes. Their vision of what comprised adequate preparation for a nurse was truly remarkable. During those first years some pupils went to the Boston Lying-In Hospital, and for a time all went to the Eye and Ear Infirmary. Sending them to the McLean Asylum was considered.

The years from 1881-1889 were especially progressive under the leadership of Anna C. Maxwell. The "Thayer" was erected, more maids were employed, greater attention was given to the health of nurses, instruction was increased, and a badge and uniform were adopted. The first "blue and white broken check" uniform was soon changed to the present black and white because the blue easily faded.

Soon after 1890 there were evidences that the responsibilities were resting heavily on the Directors. Policies became very conservative, and although good suggestions were made they were not carried out, probably because of the uncertainty of income and the uncertainty of satisfactory administration. During November, 1895, the Trustees wrote a letter to the Directors, expressing appreciation of their accomplishments. In this letter there also appeared the following: "The Trustees of the Hospital have gradually come to the belief that the best interests of the Hospital will be promoted by the establishment of a closer relation between the school and it, and that this can be best accomplished by placing

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The decade beginning 1910, with Miss Sara E. Parsons in charge, brought continued developments. Among these were increased social activities, the policy of tuition with the Hospital furnishing text-books and uniforms (instead of paying the pupils an allowance), scholarships, loan fund, full time theoretical instructor and full time practical instructor, the building of the New Home, affiliation with the McLean Hospital and the Eye and Ear Infirmary, the endowment fund, student government, cooking laboratory, five-year course with Simmons College, and the fifty-two-hour week.

The centennial year of the Hospital found the school forty-eight years old. To it had come students not only from every part of the United States and Canada, but from England, Switzerland, France, Greece, Italy, Armenia, Albania, Syria, Germany, China, Czechoslovakia, Poland and India. The graduates numbered fifteen hundred. They had gone to every State in the Union, to many countries in Europe, to South America, China, Japan, India, Australia, and Africa.

Statistics compiled in 1920 showed the status of 90 as unknown, 141 deceased, 436 married, 229 in private duty, 39 superintendents or assistant superintendents of training schools, 87 superintendents or matrons of hos-

Massachusetts General Hospital

pitals or homes, 68 head nurses, 76 in public health, and 28 instructors; 152 were listed as "at home" and many were in miscellaneous groups. Among the graduates in active work only 10 were listed as doing work other than that which had to do with the promotion of health.

Such is a brief history of the Massachusetts General Hospital Training School for Nurses. The alumnae are ever grateful to the makers of this history and pray that the future of the school may be worthy of its past.

*Sally Johnson, R.N.,
Superintendent of Nurses.*

Nursing School Advisory Committees

And how to help them function

By SALLY JOHNSON, R.N.

A STUDY OF THE *Board Members' Manual* of the National Organization for Public Health Nursing will help advisory committees to schools of nursing to function. An advisory committee must have a sound organization if it is to function effectively. Constitution and by-laws may not be needed, but there should be rules which state objectives, requirements for membership, duties of members, method of election, term of office, time of meetings, number necessary for a quorum, and the method of amendment. The committee is usually large enough to make subcommittees a necessity. Their duties should be specified and a definite time set for reporting progress. Even if the committee with which you are familiar is well organized, I still suggest that you read Appendix B in the *Manual*.

The first chapter in that book answers the question, "What is Public Health Nursing?" The functions of the nurses who work in the various fields of public health nursing are defined. Logically, the second chapter outlines the preparation that will enable the nurses to carry out these functions. The committee need concern themselves only with those paragraphs which relate to the fundamental curriculum; that which is given during the undergraduate years. As members of the community, knowing something of the work of the nurses, they should ask themselves whether or not they believe these to be the functions of public health nurses, and whether or not

the basic preparation indicated is sound. If sound, is it provided in their school? If not, should it be? If it should be, what can they do to help provide it?

It has taken the principals of schools who had their own preparation in the days when the care of the sick was 99 per cent of the work of the nurse, a long time to realize the shortages in the curricula. Now having realized these shortages, they themselves are meeting great difficulty in explaining these lacks to trustees, hospital directors, and advisory committees. These principals have been quick to prepare their students for the hospital nursing needs, but slow to prepare them for the community nursing needs. There are far too many persons who appear to believe that certain additions to the curricula are for the aggrandizement of nurses and nursing rather than for the better care of the patients. An advisory committee is in a strategic position to correct this belief. A careful reading of the first thirty pages of the *Manual* will do much to help the committee members to understand the reasons why the school's curriculum needs enrichment.

"Organizing a New Service" is the title of the fourth chapter. In it appears the following sentence: "Usually the backing of a representative lay group is included in the organization plan." "Backing" is just the word. To give this "backing," the committee members must represent the very best in the community. They must be respected personally. They must be persons who are

believed to have sound judgment. There should be no difficulty in securing this membership, for it should be just as much of an honor as an appointment to the advisory committee of any other educational institution. Nor should the responsibility of the office be accepted lightly. Members must be willing to give time and effort and to work at the cost of personal sacrifice. Attending the monthly meeting, listening to the progress report of the principal, or dropping into the institution once or twice between meetings does not discharge the full responsibilities. This may be as good a place as any to say that there must be a keen sense of ethical responsibility. I have been told of a situation where the hospital trustees disbanded their advisory committee to the school because of the petty and sometimes vicious gossip of its members. An extreme case, but a word of warning is not amiss.

Now this group, like all other similar groups, works through subcommittees. Each one must have a chairman who knows how to make the members work, and all must know to what end they are working. Subcommittees are formed according to needs. The needs of one group have been met quite satisfactorily by four subcommittees: housing and social activities, nursing education, nursing service, and one on library and committee education. The principal is ex officio a member of all. The chairmen of these subcommittees report at the monthly meetings of the entire group. A development of this year is the beginning of a plan for bi-yearly meetings of each subcommittee, meetings attended by representatives from the nursing staff. The supervisor of residences and the physical-social director meet with the committee on residences and social activities, those responsible for the curriculum with the committee on nursing education, the assistant superintendent of nurses and certain supervisors with the committee on nursing

service, and the school librarian and certain other members of the teaching staff with the subcommittee on library and on committee education.

A short paper does not allow time to discuss the functions of each committee, but I do wish to stress the importance of the work of that subcommittee which has the job of educating the entire membership. A list of required reading, easily available, will be helpful. It may include articles from current nursing literature, the history of the hospital and of the school, the alumnae bulletin and the school circular, and the annual reports. It goes without saying that the members of the committee should be familiar with the *American Journal of Nursing* and *Public Health Nursing*. The committee members, under the guidance of the nursing staff, must do most of this work of educating themselves. They cannot merely be informed by the nursing staff. Listening to the progress report of the principal, alone, builds a weak framework of understanding unless there is a firm foundation of knowledge underneath it. The *Manual* has a chapter, "Informing the Board Member."

Just a few additional remarks relative to the subcommittee on nursing service. If they visit the hospital only between the hours of 11:30 A.M. and 12:30 P.M. this committee will fail to get a typical picture of the kind of care patients receive. This is practically the only hour of the day when the majority of the patients are lying quietly in bed, having the least amount of nursing care of any time of the day. The periods to visit are between 8:00 and 10:00 A.M. and between 3:00 and 7:00 P.M. The period between 3:00 and 5:00 demonstrates the conflict between nursing education and nursing service, and this is the very time when patients are tired and need special care. This is also the time when the majority of classes are held, because night nurses can now be called, the out-

patient rush is over, and the operating room schedule is lowest. These are the hours when the need for a graduate staff and for supplementary workers is most apparent.

Members of this subcommittee on nursing service can be very useful in another way, by analyzing the complaints made against nurses who are working in the homes. These complaints may be justified or unjustified. Sometimes the patient's point of view needs to be changed. In the majority of instances, however, the nurses are probably at fault. If graduates knew that reports of poor work or of poor judgment were now and then getting back to the principals of their schools, they would often improve both work and judgment. Reports of work, good or poor, would often give suggestions for class content and perhaps provide the ounce of prevention. These subcommittees can also collect suggestions for the course on nursing in the home, a course which is taught toward the end of the senior year.

I shall mention, by title only, two other chapters in the *Manual*. These are, "Relationship of Board to Professional Staff" and "Personnel Policies." Much of this material is not applicable to the nursing school situation, but it is suggestive.

Assuming that a school has an intelligent, well-informed, conscientious, hard-working group of members in this advisory committee, what are their functions? What are their objectives? First, to aid, in their own particular way, the nursing staff to see the nursing needs of the hospital, of the home, and of the community; second, to aid, in their own particular way, the nursing staff in setting up a curriculum that will meet these needs. An advisory committee to a school of nursing may have little actual authority, but it does have great influence.

I think it may be helpful to tell you

something of the personnel and of the accomplishments of an advisory committee which has functioned for over forty years without actual authority, but with great influence. There are three trustees, known as the Trustees' Committee on the School of Nursing, of which the chairman is an alumna of the school. There are three physicians who are chiefs of services, two deans of local women's colleges, and fourteen other women from the community, of whom two are married alumnae living in nearby towns. The director of the hospital, his assistant, and the principal of the school, who is also the superintendent of nurses, are ex officio members. The entire committee meets twice a year and the women of the committee nine times a year. A member who has long served on this committee, but not the alumna trustee, is the chairman of this latter group. These women are the working group, working through subcommittees as previously indicated.

And where has their influence been of value? In every major development of the school. It is sometimes needed in minor matters as well as in major. This committee has been known to produce results after all other groups have failed; one illustration has its amusing side. Many years ago the hospital built a nurses' residence. The surrounding streets were of cobble stones; nearby was a fire station which sent out horse-drawn fire engines, and also nearby was a city sanitary department which sent out horse-drawn dump carts. The difficulties of sleeping, either day or night, can be imagined. Without avail, hospital trustees had petitioned the city to pave the streets. Soon after the residence was opened, the women of the advisory committee had a meeting in the large social room which has windows opening just above the street level. The horse-drawn fire engines and horse-drawn dump carts put on their best acts and there were

double encores. A delegation from the advisory committee waited upon the city fathers. In due time the streets were paved!

But to speak of more recent contributions. The subcommittee on housing has selected furnishings for new social rooms and old ones, and supported the policy of increasing the number of social rooms. They visit the dining-rooms and offer suggestions as to menus and service; they are interested in planning for a new dining-room.

A former chairman of the Trustees' Committee had more to do with bringing about the appointment of the first physical-social director than any other one person. The very special mission of one member of this housing and social activity committee is to guard the tennis court against being engulfed by the parking yard.

The principal of the school turns to the educators, the college deans on the committee, for support of the educational policies and practices. These women know the need for prepared teachers, for mature and prepared students, and for controlled situations in which both can work effectively. The nursing service committee, visiting the wards, sees the need for general staff nurses and ward helpers, for shorter working days and weeks, and for affiliations to supplement the field experience of the wards in the home hospital. The eight-hour day for special nurses would long have been delayed without the whole-hearted support of this advisory committee.

At the moment the banner for accomplishment is being held by the subcommittee on the library and on committee education. The chairman visited the school of library science in a local college, found there a senior who was especially

interested in nursing school libraries, and whose field work was in the library of the Bellevue nursing school. After graduation this young woman worked in the school library as a volunteer for a few weeks, and then was paid a small salary for about four months by the advisory committee. Later the hospital paid the entire salary of this young woman as a full-time worker in the nursing school. Library hours being longer than the hours of a librarian, college students, financed by the National Youth Administration and Student Aid Fund, have been secured as assistants. Now, this subcommittee is not resting on its laurels, for it believes that some hard work needs to be done in order that the committee as a whole may become even better educated.

In all this work, both the advisory committee and the school principal must remember that the lines of loyalty are never to become crossed. In the most common form of hospital school organization, the director of the hospital must be the first to consent to changes of important policies, especially those that call for money expenditures. In a very large majority of the situations, he will welcome the recommendations of the advisory committee for they often strengthen his own to the hospital's board of trustees.

In closing may I say that if those of you who are interested in lay participation in schools of nursing will study the *Board Members' Manual* of the NOPHN, you will find there suggestions for enough work to keep you busy until the National League of Nursing Education meets again in 1940.

[Read at a Round Table on Lay Participation at the Forty-fifth Annual Convention of the National League of Nursing Education, New Orleans, Louisiana, April 27, 1939.]

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